

Little Traverse Bay Bands of Odawa Indians Enrollment Office 7500 Odawa Circle Harbor Springs, MI 49740 (231) 242-1520 ■ (231) 242-1521



Relinquishment for

Minor / or Person Deemed Incompetent

Ι		, am the pa	arent/legal guard	ian (circle one) of
	, a minor	child/legal incompetent	(circle one) bor	n:
whose LTBB enrollment number	er is :	I am applying fo	or membership for	or this minor/legal
incompetent (circle one) with:			4	
	Name of Federally Recognized Tribe			
	Address	City	State	Zip Code
I request relinquishment o	fl TDD mambaushin of	the miner/income att - C	2-41111	L
I am completing this Relinquishm the determination of accepting this	nent freely and voluntaries form.	ly with full understanding	that the LTBB Tr	
Parent/Guardian/Custodian of Legal Representation			Dai	e
	NOTA	RY PUBLIC		
On this day of me, and provided	fication)	tification and acknowledged	persona (ame) I to me that he/she s Notary Stamp	igned
Notary Printed Name / N My Commission Expires on:	otary Signature			
LTBB Enrollment Staff:	Original · LTBB Trib	al Court Co	onv: LTBB Enrollment	File